B1 (Official Form 1) (1/08)		ocument)		Page 1	of 44	1			
		nkruptcy rict of Illi	Cou	urt		-		Volu	untary Petition
Name of Debtor (if individual, enter Last, First, Mi Mccoo, Shearita D	ddle):			Name of Jo	oint Debte	or (Spou	use) (Last, First,	Middle):	
All Other Names used by the Debtor in the last 8 ye (include married, maiden, and trade names):	ears						e Joint Debtor i nd trade names)		years
Last four digits of Soc. Sec. or Individual-Taxpayer EIN (if more than one, state all): <b>3286</b>	I.D. (ITIN)	No./Complete		Last four di EIN (if mor				axpayer I.D	D. (ITIN) No./Complete
Street Address of Debtor (No. & Street, City, State 8841 S Elizabeth St	& Zip Code	e):		Street Addi	ress of Jo	int Deb	tor (No. & Stree	et, City, Sta	te & Zip Code):
Chicago, IL	ZIPCOD	E <b>60620-344</b>	8						ZIPCODE
County of Residence or of the Principal Place of Bu			_	County of I	Residence	e or of the	he Principal Plac		
Mailing Address of Debtor (if different from street	address)			Mailing Ad	ldress of	Joint De	ebtor (if differen	nt from stre	et address):
	ZIPCOD							2	ZIPCODE
Location of Principal Assets of Business Debtor (if	different fro	om street address	s abov	ve):				_	
						I			ZIPCODE
<b>Type of Debtor</b> (Form of Organization)		Nature of (Check							Code Under Which Check one box.)
(Check one box.)  ✓ Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  ☐ Corporation (includes LLC and LLP)  ☐ Partnership  ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	☐ Sing U.S ☐ Rai ☐ Stoo ☐ Cor	alth Care Busine gle Asset Real E .C. § 101(51B) lroad ckbroker nmodity Broker aring Bank	ss Estate a	,	n 11	Ch   Ch   Ch	napter 7 napter 9 napter 11 napter 12 napter 13	Chap Recc Mair Chap Recc Nonn Nature of I	oter 15 Petition for openition of a Foreign of Proceeding oter 15 Petition for opinition of a Foreign main Proceeding  Debts  box.)
	Titl	Tax-Exer (Check box, otor is a tax-exer e 26 of the Unite ernal Revenue Co	if app npt or ed Sta	plicable.) rganization u		deb § 1 ind per	ots, defined in 1 01(8) as "incurrividual primaril sonal, family, of d purpose."	1 U.S.C. red by an y for a	business debts.
Filing Fee (Check one b	oox)			CI. I			Chapter 11 I	Debtors	
<ul> <li>✓ Full Filing Fee attached</li> <li>☐ Filing Fee to be paid in installments (Applicable attach signed application for the court's consider is unable to pay fee except in installments. Rule 3A.</li> </ul>	ation certify 1006(b). See	ing that the debt e Official Form	tor [	Debtor is  Check if:  Debtor's	s a small s not a sn s aggrega	nall busi te nonco	iness debtor as o	defined in 1	J.S.C. § 101(51D). 11 U.S.C. § 101(51D). wed to non-insiders or
Filing Fee waiver requested (Applicable to chapt attach signed application for the court's consider				Acceptai	s being fi nces of th	led with e plan v	this petition		rom one or more classes of
Statistical/Administrative Information  Debtor estimates that funds will be available for Debtor estimates that, after any exempt propert distribution to unsecured creditors.					d, there v	vill be n	o funds availabl	le for	THIS SPACE IS FOR COURT USE ONLY
· ·	)00- )00	5,001- 10,000	10,00 25,00		25,001- 50,000		50,001- 100,000	Over 100,000	
Estimated Assets				000,001 to million	\$100,00 to \$500		\$500,000,001 to \$1 billion	More than \$1 billion	
Estimated Liabilities  Storonomer		\$10,000,001 to \$50 million		000,001 to		0,001	\$500,000,001	More than	1

Prior Bankruptcy Case Filed Within Last	8 Years (If more than two, attach	additional sheet)
Location Where Filed: <b>None</b>	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or	Affiliate of this Debtor (If mo	ore than one, attach additional sheet)
Name of Debtor: None	Case Number:	Date Filed:
District:	Relationship:	Judge:
Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.	(To be completed whose debts are p I, the attorney for the petitioner that I have informed the petitio chapter 7, 11, 12, or 13 of ti explained the relief available un	Exhibit B  I if debtor is an individual rimarily consumer debts.)  named in the foregoing petition, declare ner that [he or she] may proceed under the 11, United States Code, and have notice each such chapter. I further certify the notice required by § 342(b) of the
	X /s/Troy L Gleason	7/24/08
	Signature of Attorney for Debtor(s)	Date
Exhi  (To be completed by every individual debtor. If a joint petition is filed, e  Exhibit D completed and signed by the debtor is attached and ma  If this is a joint petition:  Exhibit D also completed and signed by the joint debtor is attached.	ade a part of this petition.	ach a separate Exhibit D.)
	ng the Debtor - Venue	
	pplicable box.) of business, or principal assets in the	nis District for 180 days immediately
☐ There is a bankruptcy case concerning debtor's affiliate, general	•	this District.
Debtor is a debtor in a foreign proceeding and has its principal proceeding and has no principal place of business or assets in the United States in this District, or the interests of the parties will be served in reg	but is a defendant in an action or pr	roceeding [in a federal or state court]
Certification by a Debtor Who Resident (Check all app.  Landlord has a judgment against the debtor for possession of debt	olicable boxes.)	
(Name of landlord or less	or that obtained judgment)	
(Address of la	ndlord or lessor)	
·	e circumstances under which the d	

the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Desc Main

Page 2

Entered 07/24/08 09:49:25

Page 2 of 44

Name of Debtor(s): Mccoo, Shearita D

Case 08-18960 B1 (Official Form 1) (1/08)

filing of the petition.

(This page must be completed and filed in every case)

**Voluntary Petition** 

Doc 1

Filed 07/24/08

Document

(This page must be completed and filed in every case)

Name of Debtor(s):

Mccoo, Shearita D

# Signatures

# $Signature(s) \ of \ Debtor(s) \ (Individual/Joint)$

Doc 1

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Shearita D Mccoo
Signature of Debtor

Shearita D Mccoo

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

July 24, 2008

Date

Χ

# Signature of Attorney\*

# X /s/ Troy L Gleason

Signature of Attorney for Debtor(s)

# Troy L Gleason 6276510

Printed Name of Attorney for Debtor(s)

# Gleason & Gleason

Firm Name

# 77 W Washington, Ste 1218

Address

Chicago, IL 60602

# (312) 578-9530

Telephone Number

# July 24, 2008

Date

Date

# Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

# Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- ☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

# Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Date

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address		

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

<sup>\*</sup>In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

# NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

# 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

# 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

# <u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

# Case 08-18960 Doc 1 Filed 07/24/08 Entered 07/24/08 09:49:25 Desc Main Document Page 5 of 44

using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

# **Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

# Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

# 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

# Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by  $\S 342(b)$  of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer,
x	principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.	_
Certificate of the Debtor	

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Mccoo, Shearita D	X /s/ Shearita D Mccoo	7/24/2008
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint Debtor (if any)	Date

Case 08-18960 Official Form 1, Exhibit D (10/06)

Doc 1

Filed 07/24/08

Entered 07/24/08 09:49:25

Desc Main

Page 6 of 44 Document **United States Bankruptcy Court** 

Northern District of Illinois

IN RE:		Case No.
Mccoo, Shearita D		Chapter 7
	Debtor(s)	*

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed. 1. Within the 180 days **before the filing of my bankruptcy case**. I received a briefing from a credit counseling agency approved by

in which are 100 and 5 server and 11111 a larger and 11111 a larger and 11111 a larger a companied at the
the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in
performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the
certificate and a copy of any debt repayment plan developed through the agency.
2 Within the 180 days hafore the filing of my hankruntey case. I received a briefing from a credit counseling agency approved by

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed

4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:	/s/ Shearita D Mccoo	
-		

Date: July 24, 2008

 $_{B6\,Summary}$  (Follows - 08-18960 Doc 1

Filed 07/24/08

Entered 07/24/08 09:49:25

Desc Main

# Document Page 7 of 44 United States Bankruptcy Court

**Northern District of Illinois** 

IN RE:		Case No.
Mccoo, Shearita D		Chapter 7
·	Debtor(s)	•

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	3	\$ 1,700.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		\$ 32,142.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 3,542.52
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 3,610.00
	TOTAL	17	\$ 1,700.00	\$ 32,142.00	

Form 6 - Statistical Summary (1270) Doc 1 Filed 07/24/08 Entered 07/24/08 09:49:25

# Document Page 8 of 44 United States Bankruptcy Court Northern District of Illinois

Desc Main

IN RE:		Case No
Mccoo, Shearita D		Chapter 7
,	Debtor(s)	1

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

# State the following:

Average Income (from Schedule I, Line 16)	\$ 3,542.52
Average Expenses (from Schedule J, Line 18)	\$ 3,610.00
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C	
Line 20)	\$ 4,960.52

# **State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 32,142.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 32,142.00

B6A (Official Form 8A) 012/07/18960	Doc 2
-------------------------------------	-------

Filed 07/24/08 Document

Entered 07/24/08 09:49:25 Page 9 of 44

Desc Main

Case No.

IN RE Mccoo, Shearita D

© 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Debtor(s)

(If known)

# **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				

**TOTAL** 

0.00

(Report also on Summary of Schedules)

B6B (Official FCASE) (18/07)
------------------------------

Filed 07/24/08 Document

Doc 1

Entered 07/24/08 09:49:25 Page 10 of 44 Desc Main

(If known)

IN RE Mccoo, Shearita D

Debtor(s) Case No. \_

# **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1.	Cash on hand.	Х			
2.	Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking		100.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, include audio, video, and computer equipment.		Normal and necessary household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances, costume jewelry less than \$500 each piece		1,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		Clothing		200.00
7.	Furs and jewelry.	X			
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Term life - through work - No cash surrender value		0.00
10.	Annuities. Itemize and name each issue.	Х			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401K		400.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	Х			

B6B (Official FCASE) 98-18960	Doc 1	Filed 07/24/08	Entered 07/24/08 09:49:29
Dob (Official Form ob) (12/07) Cond		Document	Page 11 of 44

IN RE Mccoo, Shearita D

Case No. \_

Debtor(s)

(If known)

Desc Main

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

		, ,		1	<u></u>
	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15.	Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26.	Boats, motors, and accessories.	X			
	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			

6B (Official FCASE) 98018960	Doc 1	Filed 07/24/08	Entered 07/24/08 09:49:25
DOD (OTHERN FORM OD) (12/07) CONG		Document	Page 12 of 44

Debtor(s)

IN RE Mccoo, Shearita D

Case No. (If known)

Desc Main

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X X			
35. Other personal property of any kind not already listed. Itemize.				
		TO	ΓAL	1,700.00

Doc 1 Filed 07/24/08 Document

Entered 07/24/08 09:49:25 Page 13 of 44 Desc Main

(If known)

IN RE Mccoo, Shearita D

Debtor(s)

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:

Check if debtor claims a homestead exemption that exceeds \$136,875.

Case No. \_

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE B - PERSONAL PROPERTY			
Checking	735 ILCS 5 §12-1001(b)	100.00	100.00
Normal and necessary household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances, costume jewelry less than \$500 each piece	735 ILCS 5 §12-1001(b)	1,000.00	1,000.00
Clothing	735 ILCS 5 §12-1001(a)	200.00	200.00
401K	40 ILCS 5 §§22-230, 4-135, 6-213, 19-117	400.00	400.00

Filed 07/24/08 Document

Debtor(s)

Entered 07/24/08 09:49:25 Page 14 of 44 Desc Main

(If known)

IN RE Mccoo, Shearita D

Case No.

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.								
			Value \$	1	İ			
ACCOUNT NO.				T				
			Value \$	1	Ī			
ACCOUNT NO.								
			Value \$	$\frac{1}{1}$				
ACCOUNT NO.				T	T			
					Ī			
			Value \$	$\frac{1}{2}$	İ			
•				Sub	otot	al		
ocntinuation sheets attached			(Total of th				\$	\$
			(Use only on la		Tot pag		\$	\$
							(Report also on Summary of Schedules.)	(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

Filed 07/24/08 Document

Entered 07/24/08 09:49:25 Page 15 of 44 Desc Main

IN RE Mccoo, Shearita D

© 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Debtor(s)

Case No. \_\_\_\_\_(If known)

# SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

liste	eport the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority d on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on Statistical Summary of Certain Liabilities and Related Data.
V	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
ΤY	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	<b>Domestic Support Obligations</b> Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
	Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
	Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	<b>Deposits by individuals</b> Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
	Taxes and Certain Other Debts Owed to Governmental Units  Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to Maintain the Capital of an Insured Depository Institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
	Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
	* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.
	<b>0</b> continuation sheets attached

B6F (Official FC ASE) 08-18960	Doc 1	Filed 07/24/08	Entered 07/24/08 09:49:25
bor (official Form of ) (12/07)		Document	Page 16 of 44

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

IN RE Mccoo, Shearita D

Case No.

Desc Main

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

# Debtor(s)

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

HUSBAND, WIFE, JOINT, OR COMMUNITY UNLIQUIDATED CONTINGENT DISPUTED CREDITOR'S NAME, MAILING ADDRESS AMOUNT DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, AND ACCOUNT NUMBER. CONSIDERATION FOR CLAIM. IF CLAIM IS (See Instructions Above.) SUBJECT TO SETOFF, SO STATE CLAIM ACCOUNT NO. **AAA Checkmate** 7647 W 63rd St Summit, IL 60501-1811 625.00 Installment account opened 4/05 ACCOUNT NO. 4052137046517016 American General Finan 20 N Clark St Chicago, IL 60602-4109 6.828.00 ACCOUNT NO. Asset Acceptance PO Box 2036 Warren, MI 48090-2036 6,304.00 ACCOUNT NO. AT & T PO Box 8100 Aurora, IL 60507-8100

5 continuation sheets attached

Subtotal (Total of this page)

13,757.00

0.00

Total

(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical

Summary of Certain Liabilities and Related Data.)

Document

Page 17 of 44

Doc 1 Filed 07/24/08 Entered 07/24/08 09:49:25 Desc Main

IN RE Mccoo, Shearita D

Debtor(s) Case No. \_

(If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(1	Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4239801014050781			Revolving account opened 7/05			П	
Ccs/first National Ban Attn: General Correspondense Sioux Falls, SD 57117							561.00
ACCOUNT NO.						Н	001100
Check N Go - Corporate Attn Bankruptcy 5155 Financial Way Mason, OH 45040-7447							1,000.00
ACCOUNT NO.						Н	1,000.00
Christ Hospital Billing 4440 W 95th St Oak Lawn, IL 60453-2600							462.00
ACCOUNT NO.			Assignee or other notification for:			Н	.02.00
Malcolm S Gerald 332 S Michigan Ave Ste 600 Chicago, IL 60604			Christ Hospital				
ACCOUNT NO.						Н	
Clarian Health Partners 2212 Reliable Parkway Chicago, IL 60686-0022							75.00
ACCOUNT NO.						Н	75.00
Comcast Attn Bankruptcy 1500 Market St Philadelphia, PA 19102-2100							0.00
ACCOUNT NO. <b>34681569</b>	H		Open account opened 7/07	H		Н	0.00
Credit Management Lp 4200 International Pkwy Carrollton, TX 75007-1912							243.00
Sheet no. 1 of 5 continuation sheets attached to	_		<u> </u>	L Sub	tota	∟ al	
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the (Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate	t als	Fota o o	al n al	\$ <b>2,341.00</b>

Doc 1 Filed 07/24/08 Document

Bago 18 of 44

Desc Main

IN RE Mccoo, Shearita D

© 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Document Page 18 of 44

Case No.

Debtor(s)

(If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(1	Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Assignee or other notification for:				
Comcast Cablevision-indianapol			Credit Management Lp				
ACCOUNT NO. <b>591846541</b>			Open account opened 10/01				
Credit Protection Asso PO Box 802068 Dallas, TX 75380-2068							149.00
ACCOUNT NO.			Assignee or other notification for:				148.00
At&t Broadband			Credit Protection Asso				
ACCOUNT NO. <b>3248031</b>			Open account opened 7/07				
Fair Collections And Out 6931 Arlington Rd Ste 40 Bethesda, MD 20814-5231							2 570 00
ACCOUNT NO.			Assignee or other notification for:				2,570.00
Wind Drift 038855			Fair Collections And Out				
ACCOUNT NO. <b>8436223</b>			Open account opened 2/08				
Ffcc-columbus Inc PO Box 20790 Columbus, OH 43220-0790							
			And the second s	-			200.00
ACCOUNT NO.  Medical Group-riley			Assignee or other notification for: Ffcc-columbus Inc				
Sheet no. 2 of 5 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Sub his p			\$ 2,918.00
			(Use only on last page of the completed Schedule F. Repo the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relat	rt als Statis	stica	n al	\$

Document

Doc 1 Filed 07/24/08 Entered 07/24/08 09:49:25 Desc Main Page 19 of 44

IN RE Mccoo, Shearita D

© 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Debtor(s)

\_ Case No. \_ (If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		((	Continuation Sheet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							
Fifth Third Bank Fifth Third Center Cincinnati, OH 45263-0001							0.00
ACCOUNT NO.	-		colle ctions	H			0.00
First Federal Credit Control PO Box 20790 Columbus, OH 43220-0790							200.00
ACCOUNT NO.			Assignee or other notification for:				200.00
Emergency Medical Group			First Federal Credit Control				
ACCOUNT NO.							
Great Lakes Specialty Finance Dba Check N Go 1027 S Roselle Rd Schaumburg, IL 60193							0.00
ACCOUNT NO. A100hcc0010796892							0.00
Hamilton Ac 859 Conner St Noblesville, IN 46060-2613							
ACCOUNT NO.			Assignee or other notification for:	$\vdash$			406.00
04 Hamilton County Clerk			Hamilton Ac				
ACCOUNT NO. <b>I200wvh2034636012</b>			Open account opened 9/07				
Imc Credit Services PO Box 20636 Indianapolis, IN 46220-0636							
							380.00
Sheet no. 3 of 5 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of th	_	age	e)	\$ 986.00
			(Use only on last page of the completed Schedule F. Repor the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relate	t als tatis	tica	n al	\$

IN RE Mccoo, Shearita D

Document

Debtor(s)

Doc 1 Filed 07/24/08 Entered 07/24/08 09:49:25 Desc Main Page 20 of 44

\_ Case No. \_ (If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(•	Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Assignee or other notification for:	T			
Westview Hospital			Imc Credit Services				
ACCOUNT NO.				-			
Indianapolis Power And Light PO Box 110 Indianapolis, IN 46206-0110							100.00
ACCOUNT NO.			ticket				100.00
Juneau County Justice Center 200 Oak St PO Box 246 Mauston, WI 53948-0246							261.00
ACCOUNT NO. <b>576524</b>			Installment account opened 9/01				
Nationwide Cassel Llc 3435 N Cicero Ave Chicago, IL 60641-3782							4 000 00
ACCOUNT NO.			Assignee or other notification for:	+			1,966.00
Pekay & Blistein 77 W Washington St Ste 719 Chicago, IL 60602-3274			Nationwide Cassel Llc				
ACCOUNT NO. <b>34772190454</b>			Installment account opened 5/03				
Nuvell Credt PO Box 130156 Roseville, MN 55113-0002							8,382.00
ACCOUNT NO.							0,002.00
PLS Financial Attn Robert M Wolfberg 300 N Elizabeth St Ste 4E Chicago, IL 60607-1143							500.00
Sheet no. 4 of 5 continuation sheets attached to	1			Sub	tota	al	
Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of the Completed Schedule F. Report the Summary of Schedules, and if applicable, on the Summary of Certain Liabilities and Relate	nis p t als tatis	age Fota so o	e) al n	\$ <b>11,209.00</b> \$

1/08 Entered 07/24/08 09:49:25 at Page 21 of 44

Desc Main

IN RE Mccoo, Shearita D

© 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Document Page 21 01 4

Case No. \_\_\_\_\_

Debtor(s)

# (If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		(1	Continuation Sneet)				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Assignee or other notification for:	H		Н	
Payday Loan Store Of Illinois 9902 W Western Ave Chicago, IL 60619-7013			PLS Financial				
ACCOUNT NO.			tickets	П		П	
State Of Indiana Bureau Of Motor Vehicles 100 N Senate Ave Indianapolis, IN 46204-2214							400.00
ACCOUNT NO. <b>551704898</b>			Revolving account opened 3/04	П		П	
Wfnnb/metro Style 220 W Schrock Rd Westerville, OH 43081-2873							531.00
ACCOUNT NO.							
ACCOUNT NO.	_						
ACCOUNT NO.							
ACCOUNT NO.							
$\begin{array}{c} \text{Sheet no.} \ \underline{\textbf{5}} \ \text{of} \ \underline{\textbf{5}} \ \text{continuation sheets attached to} \\ \text{Schedule of Creditors Holding} \ \text{Unsecured Nonpriority Claims} \end{array}$			(Total of th	Sub is p			\$ 931.00
			(Use only on last page of the completed Schedule F. Report the Summary of Schedules, and if applicable, on the St Summary of Certain Liabilities and Relate	also atis	tica	n al	\$ 32,142.00

R6G (Official Case 08,18960	Doc 1	Filed 07/24/08	Entered 07/24/08 09:49:25	Desc Main	
500 (Official Form 00) (12/07)		Document	Page 22 of 44		
IN RE Mccoo Shearita D			Case No.		

Debtor(s)

(If known)

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

вы (Official Case 08,18960	Doc 1	Filed 07/24/08	Entered 07/24/08 09:49:2
Boll (Ciliciai I offii off) (12/07)		Document	Page 23 of 44

Case No.

Debtor(s)

(If known)

Desc Main

# **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors

IN RE Mccoo, Shearita D

NAME AND ADDRESS OF CREDITOR	NAME AND ADDRESS OF CODEBTOR

Doc 1 Filed 07/24/08 Document

Entered 07/24/08 09:49:25 Page 24 of 44 Desc Main

(If known)

IN RE Mccoo, Shearita D

Debtor(s)

Case No. \_\_\_

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

Debtor's Marital Status		DEPENDENTS OF DEBTOR AND SPOUSE								
Single		RELATIONSHIP(S):				AGE(S): 12 9				
EMPLOYMENT:		DEBTOR			SPOUSE					
Occupation Name of Employer How long employed Address of Employer	Respiratory 1 Christ Hospit 1 years 4440 W 95th Oak Lawn, IL	al Billing St								
	gross wages, sa	r projected monthly income at time case filed) dary, and commissions (prorate if not paid month	nly)	\$ \$	DEBTOR <b>4,960.52</b>		SPOUSE			
3. SUBTOTAL 4. LESS PAYROL				\$	4,960.52					
<ul><li>a. Payroll taxes a</li><li>b. Insurance</li><li>c. Union dues</li><li>d. Other (specify)</li></ul>		ity		\$ \$ \$	1,418.00	Φ				
5. SUBTOTAL O				\$ \$ \$	1,418.00 3,542.52					
7. Regular income 8. Income from rea 9. Interest and divid 10. Alimony, maint that of dependents	from operation of the large of	of business or profession or farm (attach detailed		\$ \$ \$ \$	0,042.02	\$ \$ \$ \$				
11. Social Security (Specify)		nment assistance		\$ \$		\$ \$				
12. Pension or retir 13. Other monthly	income			\$		\$				
(Specify)				\$ \$		\$ \$				
14. SUBTOTAL O 15. AVERAGE M		HROUGH 13 COME (Add amounts shown on lines 6 and 14)		\$ \$	3,542.52	\$ \$				
		ONTHLY INCOME: (Combine column totals for the properties of the column totals for the column total for the column total	rom line 15;		\$	3,542.5	2			

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None** 

Page 25 of 44

(If known)

IN RE Mccoo, Shearita D

@ 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Debtor(s)

\_ Case No. \_

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR	.( <b>S</b> )	
Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorat quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the dependence on Form22A or 22C.	e any paymen eductions from	ts made biweekly, n income allowed
Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete expenditures labeled "Spouse."	e a separat	te schedule of
1. Rent or home mortgage payment (include lot rented for mobile home) a. Are real estate taxes included? Yes No _✓	\$	720.00
b. Is property insurance included? Yes No No		
a. Electricity and heating fuel	\$	300.00
b. Water and sewer	\$ —	
c. Telephone	\$	120.00
d. Other	\$	
	<u>\$</u>	
3. Home maintenance (repairs and upkeep)	\$	50.00
4. Food	\$	700.00
5. Clothing	\$	150.00
6. Laundry and dry cleaning	\$	150.00
7. Medical and dental expenses	\$	150.00
8. Transportation (not including car payments)	\$	350.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	100.00
10. Charitable contributions	\$	
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	
b. Life	\$	
c. Health		
d. Auto	\$	
e. Other	\$	
	\$	
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	
	\$	
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	
b. Other	\$	
	\$	
14. Alimony, maintenance, and support paid to others	\$	
15. Payments for support of additional dependents not living at your home	\$	
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
17. Other Child Care	\$	600.00
Personal Car And Grooming	\$	120.00
School Expenses	\$	100.00
40 AVED A CE MONEY V EVED NORG (E . 11) 4 45 D		
<b>18. AVERAGE MONTHLY EXPENSES</b> (Total lines 1-17. Report also on Summary of Schedules and, if		0.040.00
applicable, on the Statistical Summary of Certain Liabilities and Related Data.	\$	3,610.00
19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing o	of this docu	ıment:

# 20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$ 3,542.52
b. Average monthly expenses from Line 18 above	\$ 3,610.00
c. Monthly net income (a. minus b.)	\$ -67.48

(If known)

(Print or type name of individual signing on behalf of debtor)

IN RE Mccoo, Shearita D

© 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Debtor(s)

Case No.

# DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 19 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: July 24, 2008 Signature: /s/ Shearita D Mccoo Debtor Shearita D Mccoo Signature: (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief. Signature:

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Entered 07/24/08 09:49:25

Desc Main

Document Page 27 of 44 United States Bankruptcy Court

Northern District of Illinois

IN RE:	Case No
Mccoo, Shearita D	Chapter 7
Debtor(s)	<u> </u>

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

# **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. I1 U.S.C. § 101.

# 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE 4,960.00 2008 47,918.00 2007 35,000.00 2006

# 2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

# 3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	Case 08-18960		d 07/24/08 cument F		/24/08 09:49:25 14	Desc Main
None	b. Debtor whose debts are not proposed ing the commencement of \$5,475. If the debtor is an indiviousligation or as part of an alternate debtors filing under chapter 12 of is filed, unless the spouses are seen	rimarily consumer of f the case unless the idual, indicate with tive repayment sche or chapter 13 must in	debts: List each pa e aggregate value o an asterisk (*) any dule under a plan b nclude payments an	yment or other to of all property the payments that we y an approved no and other transfers	ransfer to any creditor ma at constitutes or is affect were made to a creditor of inprofit budgeting and cre	ted by such transfer is less than n account of a domestic support edit counseling agency. (Married
None	c. All debtors: List all payments who are or were insiders. (Marrie a joint petition is filed, unless the	ed debtors filing und	der chapter 12 or c	hapter 13 must ir	clude payments by either	
4. Su	its and administrative proceeding	ngs, executions, gan	nishments and at	tachments		
None	a. List all suits and administrative bankruptcy case. (Married debtor not a joint petition is filed, unless	ors filing under chap	ter 12 or chapter 1	3 must include in	nformation concerning ei	
AND natio	TION OF SUIT CASE NUMBER Onwide Cassel V McCoo 1 100371	NATURE OF PRO Collections	OCEEDING	COURT OR AND LOCA Circuit Cou		STATUS OR DISPOSITION pending
None	b. Describe all property that has the commencement of this case. or both spouses whether or not a	(Married debtors fi	ling under chapter	12 or chapter 13	must include information	on concerning property of either
5. Re	possessions, foreclosures and re	turns				
None	List all property that has been rep the seller, within <b>one year</b> imme include information concerning joint petition is not filed.)	ediately preceding the	ne commencement	of this case. (M	arried debtors filing unde	er chapter 12 or chapter 13 must
Nuve PO E	IE AND ADDRESS OF CREDIT Bell Financial Box 1762 Beley, CO 80632	OR OR SELLER	DATE OF REP FORECLOSUR TRANSFER OI 5/3/08	RE SALE,	DESCRIPTION AND OF PROPERTY repo 2003 malibu	VALUE
6. As	signments and receiverships					
None	a. Describe any assignment of pro (Married debtors filing under cha unless the spouses are separated	apter 12 or chapter 13	3 must include any			
None	b. List all property which has be commencement of this case. (Ma spouses whether or not a joint pe	rried debtors filing ı	ınder chapter 12 or	chapter 13 must	include information conc	cerning property of either or both
7. Gi	fts					
None	List all gifts or charitable contrib- gifts to family members aggregat per recipient. (Married debtors fi a joint petition is filed, unless th	ing less than \$200 in iling under chapter	n value per individu 12 or chapter 13 m	ual family membe ust include gifts	er and charitable contribu or contributions by either	tions aggregating less than \$100
8. Lo	sses					
None	List all losses from fire, theft, ot <b>commencement of this case</b> . (M a joint petition is filed, unless th	larried debtors filing	under chapter 12	or chapter 13 mu	st include losses by eithe	
9. Pa	yments related to debt counselin	ng or bankruptcy				
None	List all payments made or proper consolidation, relief under bankr of this case.	rty transferred by or				

Case 08-18960

Doc 1

Filed 07/24/08

Entered 07/24/08 09:49:25

Desc Main

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

351.00

NAME AND ADDRESS OF PAYEE Gleason & Gleason 77 W Washington, Ste 1218

Chicago, IL 60602

### 10. Other transfers

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

PAYOR IF OTHER THAN DEBTOR

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

### 11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION 401K

TYPE AND NUMBER OF ACCOUNT AND AMOUNT OF FINAL BALANCE 401K

AMOUNT AND DATE OF SALE

OR CLOSING \$4000.00 2007

## 12. Safe deposit boxes

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

# 14. Property held for another person

 $\checkmark$ 

List all property owned by another person that the debtor holds or controls.

### 15. Prior address of debtor

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

NAME USED DATES OF OCCUPANCY 3930 Windwright Dr West, Indianapolis Same 2005-2007

### 16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resided with the debtor in the community property state.

# © 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

# 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

### 18. Nature, location and name of business

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: July 24, 2008	Signature /s/ Shearita D Mccoo	
	of Debtor	Shearita D Mccoo
Date:	Signature	
	of Joint Debtor	
	(if any)	
	O continuation pages attached	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

# Case 08-18960 Doc 1 Filed 07/24/08 Entered 07/24/08 09:49:25 Desc Main

Document Page 31 of 44 United States Bankruptcy Court Northern District of Illinois

IN RE:				Case No					
Mccoo, Shearit	a D			C	hapter 7				
	Debtor	r(s)							
	<b>CHAPTER 7 INDI</b>	VIDUAL DEB	TOR'S STATEM	MENT OF	INTEN	TION			
I have filed a so	chedule of assets and liabilities whe chedule of executory contracts and the following with respect to the property of the pro	l unexpired leases	which includes persor	nal property				Dale or Wh	
Description of Secured Pro	perty (	Creditor's Name			Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)	
None									
								Lease will be assumed pursuant to 11 U.S.C. §	
Description of Leased Prop	erty	<u>L</u>	essor's Name					362(h)(1)(A)	
07/24/2008	/s/ Shearita D Mccoo								
Date	Shearita D Mccoo		Debtor			Join	nt Debtor (i	f applicable)	
I declare under percompensation and and 342 (b); and, bankruptcy petitio	enalty of perjury that: (1) I am a have provided the debtor with a co (3) if rules or guidelines have been preparers, I have given the debtor ebtor, as required by that section.	bankruptcy petitiopy of this document	on preparer as define ent and the notices and rsuant to 11 U.S.C. §	d in 11 U.S l information 110(h) settii	.C. § 110; required on the required of the req	(2) I prepunder 11 Unum fee for	pared this d .S.C. §§ 110 r services ch	ocument for 0(b), 110(h), nargeable by	
	me and Title, if any, of Bankruptcy Pet petition preparer is not an indivi	_	me, title (if any), addr				red by 11 U.S		
responsible persoi	n, or partner who signs the docum	ent.							
Address									
Signature of Bankrup	otcy Petition Preparer			Da	te				
	Security numbers of all other indiv	iduals who prepar	ed or assisted in prepar	ring this docu	ıment, unle	ess the bank	cruptcy petit	ion preparer	

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

# Case 08-18960 Doc 1 Filed 07/24/08 Entered 07/24/08 09:49:25 Desc Main Document Page 32 of 44 United States Bankruptcy Court Northern District of Illinois

IN RE:		Case No
Mccoo, Shearita D		Chapter 7
·	Debtor(s)	• -
	VERIFICATION OF CREDIT	FOR MATRIX
		Number of Creditors
	•	true and correct to the best of my (our) knowledge.
Date: <b>July 24, 2008</b>	/s/ Shearita D Mccoo	
	Debtor	
	Joint Debtor	

Case 08-18960 Doc 1 Filed 07/24/08 Entered 07/24/08 09:49:25 Desc Main Document Page 33 of 44

Mccoo, Shearita D 8841 S Elizabeth St Chicago, IL 60620-3448 Document Page Comcast Attn Bankruptcy 1500 Market St Philadelphia, PA 19102-2100

Indianapolis Power And Light PO Box 110 Indianapolis, IN 46206-0110

Gleason & Gleason 77 W Washington, Ste 1218 Chicago, IL 60602 Credit Management Lp 4200 International Pkwy Carrollton, TX 75007-1912 Juneau County Justice Center 200 Oak St PO Box 246 Mauston, WI 53948-0246

AAA Checkmate 7647 W 63rd St Summit, IL 60501-1811 Credit Protection Asso PO Box 802068 Dallas, TX 75380-2068

Malcolm S Gerald 332 S Michigan Ave Ste 600 Chicago, IL 60604

American General Finan 20 N Clark St Chicago, IL 60602-4109 Fair Collections And Out 6931 Arlington Rd Ste 40 Bethesda, MD 20814-5231 Nationwide Cassel Llc 3435 N Cicero Ave Chicago, IL 60641-3782

Asset Acceptance PO Box 2036 Warren, MI 48090-2036 Ffcc-columbus Inc PO Box 20790 Columbus, OH 43220-0790 Nuvell Credt PO Box 130156 Roseville, MN 55113-0002

AT & T PO Box 8100 Aurora, IL 60507-8100 Fifth Third Bank Fifth Third Center Cincinnati, OH 45263-0001 Payday Loan Store Of Illinois 9902 W Western Ave Chicago, IL 60619-7013

Ccs/first National Ban Attn: General Correspondense Sioux Falls, SD 57117 First Federal Credit Control PO Box 20790 Columbus, OH 43220-0790 Pekay & Blistein 77 W Washington St Ste 719 Chicago, IL 60602-3274

Check N Go - Corporate Attn Bankruptcy 5155 Financial Way Mason, OH 45040-7447 Great Lakes Specialty Finance Dba Check N Go 1027 S Roselle Rd Schaumburg, IL 60193 PLS Financial Attn Robert M Wolfberg 300 N Elizabeth St Ste 4E Chicago, IL 60607-1143

Christ Hospital Billing 4440 W 95th St Oak Lawn, IL 60453-2600 Hamilton Ac 859 Conner St Noblesville, IN 46060-2613 State Of Indiana Bureau Of Motor Vehicles 100 N Senate Ave Indianapolis, IN 46204-2214

Clarian Health Partners 2212 Reliable Parkway Chicago, IL 60686-0022 Imc Credit Services PO Box 20636 Indianapolis, IN 46220-0636

Wfnnb/metro Style 220 W Schrock Rd Westerville, OH 43081-2873 Case 08-18960 Doc 1 Filed 07/24/08 Entered 07/24/08 09:49:25 Desc Main Document Page 34 of 44 United States Bankruptcy Court Northern District of Illinois

Levey		
IN RE:		Case No.
Mccoo, Shearita D		Chapter 7
D	ebtor(s)	

PAYMENT ADVICES COVER SHEET

Form 1040 (2007)

<u>1040</u>		. Individual Income Ta ar Jan. 1-Dec. 31, 2007, or other tax year b		<b>607</b> Pa <b>⊕</b> e3	<u>5-0</u> f	44rite	or staple in this spa	
1.		year b	eginining	, 2007, ending			ocial security na	
â							80-3286	
E SHI	EARI	TA D McCOO					's social secur	ity no.
H					L			
		OUTH ELIZABETH					ou must enter	$\overline{\mathbf{A}}$
	rcag	o IL 60620					our SSN(s) abov ng a box below will	
ential on Campa	ian	Charle have Street and the street	ten tiu .aa.			change	your tax or refund.	
Bri Gunipa	1	Check here if you, or your spouse it Single		E -1			ou   Spouse	
g Status		Married filing jointly (even if on	hy ana had income)	Head of household			. , .	,
; -	3	Married filing separately. Enter		qualifying person is		but not	your dependent	, enter
ik only ∎ox.	-	and full name here.	PHE SIN DOVE	full frame here. Qualifying widow(e				
mptions	6a	X Yourself. If someone can cla	aim you as a dependent do	not check hov 6s	s) WIUT U	epende	Boxes checked	1.)
e than four	b	Spouse	yeu as a coperident, co	THOSE CHECK BOX GA		•••	on 6a and 6b No. of children	
<pre>pdents, see pctions.</pre>	С	Dependents:	(2) Dependent's	(3) Dependent's	(4) √	if quall-	on 6c who:	2
(1) First na	me	Last name	social security number	relationship to	fying c	child for ax credit inst.)	it • did not live	
IMAN		RILEY	321-92-4521	Daughter		X	to divorce	
<u>ASANT</u>	<u> </u>	JONHSON	408-87-5367	Daughter		X	or separation (see inst.)	
							<ul> <li>Dependents on 6 not entered above</li> </ul>	
							Add numbers on	
	d	Total number of exemptions claim	ed ,				lines above	3
	7	Wages, salaries, tips, etc. Attach F	orm(s) W-2					
come	0-	Tarable by the same of the sam				7	47,	918
tach Form(s)	8a b	Taxable interest. Attach Schedule				8a		
-2 here. Also	9a	Tax-exempt interest. Do not inclined Ordinary dividends. Attach Sched	ude on line 8a	8b				
tach Forms I-2G and	b	Qualified dividends (see instruction	ne)	9ь		9a		· .
99-R if tax	10	Taxable refunds, credits, or offsets				10		
as withheld.	11	Alimony received		axes (see instructions)		10		
1	12	Business income or (loss). Attach				12		
	13	Capital gain or (loss). Attach Sche	dule D if required. If not req	uired, check here		13		
you did not	14	Other gains or (losses). Attach For	m 4797			14		
jet a W-2, jee instructions.	15a	IRA distributions 15a	15b					
ec manacaona.	16a	D Taxable amount				16b	4,	100
	17	Rental real estate, royalties, partner	E	17				
Enclose, but do not attach, any	18	Farm income or (loss). Attach Sch	edule F		, [	18		
payment. Also,	19	Unemployment compensation			[	19		
please use	20a 21	b Taxable amount (see inst.)			20b			
Form 1040-V.	22	Other income.				21		
	23	Add the amounts in the far right co Educator expenses (see instruction			me ▶	22	52 <b>,</b>	018
Adjusted	24	Certain business expenses of rese		23				
Gross		and fee-basis government officials	Attach Form 2106/2106 E7	24				
Income	25	Health savings account deduction.		3DV		COLUMN TO THE PARTY OF THE PART		
	26	Moving expenses. Attack Fer. 30			650	70		
	27	One-half of self-employment tax.	Attach Schedule SE	27				
	28	Self-employed SEP, SIMPLE, and	qualified plans	28				
	29	Self-employed health insurance de	eduction (see instructions)	29				
	30	Penalty on early withdrawal of savi	ngs	30				
	31a	Alimony paid b Recipient's SSN ▶		31a		11 12 12 12 12 12 12 12 12 12 12 12 12 1		
	32	IRA deduction (see instructions) .		32				
	33	Student loan interest deduction (se	ee instructions),,	33				
	34 35	Tuition and fees deduction. Attach		34				
	35	Domestic production activities ded	Attach Form 8903	35	9	contract of		

Case 08-18960 Doc 1 Filed 07/24/0 Filed 07/24/08 Entered 07/24/08 09:49:25 40 (2007) Page 36 of 44 38 id Amount from line 37 (adjusted gross income) . . . . . . You were born before January 2, 1943, Blind. Total boxes checked Check You were born before January 2, 1943, 39a rd ion ь If your spouse itemizes on a separate return or you were a dual-status alien, see inst. and check here > 39b 40 40 22,271 Itemized deductions (from Schedule A) or your standard deduction (see left margin) . . . . 41 41 29,097 x on 42 If line 38 is \$117,300 or less, multiply \$3,400 by the total number of exemptions claimed on who 10,200 line 6d. If line 38 is over \$117,300, see the worksheet in the instructions . . . . . . . . . . 42 18,897 43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- . . . . . . 43 dent, it. Tax (see inst.). Check if any tax is from: a Form(s) 8814 b Form 4972 c Form(s) 8889 2,271 44 45 Alternative minimum tax (see instructions). Attach Form 6251. 45 Credit for the Credit 46 46 2,271 or 47 Credit for the elderly or the disabled. Attach Schedule R . . . . . 48 48 rtely, 49 50 Residential energy credits. Attach Form 5695 ...... d 50 51 52 Child tax credit (see instructions). Attach Form 8901 if required 52 2,000 ring (er), 10 53 Retirement savings contributions credit. Attach Form 8880 . . . 53 54 Credits from: a Form 8396 b Form 8859 c Form 8839 54 55 Other credits: a Form 3800 b Form 8801 C Form 55 hold, 56 2,000 Add lines 47 through 55. These are your total credits . . . . . 57 Subtract line 56 from line 46. If line 56 is more than line 46, enter -0-58 58 Unreported social security and Medicare tax from: a Form 4137 b Form 8919 59 59 60 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required . . . . 410 60 61 61 62 62 63 Add lines 57 through 62. This is your total tax ... 681 2,954 64 Federal income tax withheld from Forms W-2 and 1099 . . . . FORM 1099 64 nents 65 2007 estimated tax payments & amt. applied from 2006 return 65 have a 66a 66a ь Nontaxable combat pay election ▶ 66b tule EIC 67 Excess social security and tier 1 RRTA tax withheld (see inst.) 67 68 68 Amount paid with request for extension to file (see instructions) 69 69 Payments from: a Form 2439 b Form 4136 C Form 8885 70 71 Refundable credit for prior year minimum tax from Form 8801, line 27  $\dots$  , 71 72 2,954 73 If line 72 is more than line 63, subtract line 63 from line 72. This is the amount you overpaid ınd 73 74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here. . . . . . 74a Routing no. 0 8 3 0 0 8 4 6 9 c Type: \$\overline{\text{Count}}\$ Checking \$\overline{\text{Savings}}\$ Savings Account no. 2 \$\overline{\text{X}}\$ 3 6 7 5 0 9 3 3 4 8 0 3 2 8 6 \$\overline{\text{Amount}}\$ Amount you owe. Subtract to 2 trub backs, for stalls appropriate by, see instructions **▶** b ist. Il in 74b, ▶ d ind 74d, rm 8888 huwa pay, se instructions 75 **runt** Owe Estimated tax penalty (see instructions) 77 d Party Do you want to allow another person to discuss this return with the IRS (see instructions)? . . Yes. Complete the following. Phone > ignee Personal identification number (PIN)  $\blacktriangleright$ Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and be they are true, correct, and complete. Declaration of preparer (other than taxpeyer) is based on all information of which preparer has any knowledge. Your signature Date Daytime phone number RESPIRATORY THERA Spouse's signature. If a joint return, both must sign. Spouse's occupation

Desc Main

return? е сору Preparer's Date Preparer's SSN or PTIN 3-14-08 Check if signature Q oche 344-60-6986 ROCHELLE AUSTIN EIN 36-4443406 Firm's name (or yours ) 54 E 163RD COURT Phone no. address, & ZIP code SOUTH HOLLAND IL 60473-2110 708-331 TWF 21461 Copyright Forms (Software Only) - 2007 TW Form 1040 (2007)

							ay Date:
		•					1/3/2008
Description REGULAR REGULAR OVERTIME NGTSHIFT OVERTIME NCLIN ED WKDSHIFT SCHD PTO NSCHDPTO HLDYPREM 07 AWARD EVESHIFT CLIN ED	Rate 21.1665 20.6000 32.6450 3.0000 33.2515 20.6000 2.0000	Hours 40.00 38.78 19.22 93.22 4.00 1.22 12.00	Current \$846.66 \$798.87 \$300.98 \$279.66 \$133.01 \$25.13 \$24.00 \$0.00 \$0.00 \$0.00 \$0.00	\$2,623.87 \$1,535.79 \$0.00 \$25.13 \$265.26 \$494.40 \$329.60 \$293.55	Taxes/Deds. FEDERAL ILLINOIS MEDICARE SOC SEC DTLPPO F HP1000 F OPT ADD OPTLF C OPTLF EE OPTLF S GIFTSHOP	Current \$229.32 \$60.06 \$32.38 \$138.44 \$17.49 \$158.00 \$3.46 \$0.37 \$2.80 \$5.50 \$32.54	Y-T-D \$1,304.26 \$399.86 \$216.69 \$926.53 \$122.43 \$1,208.00 \$24.22 \$2.59 \$19.60 \$38.50 \$104.94
PTO BAL		80.55	ASSE DEL S. L.		WASHMUT CORUS LAKESIDE	\$1,572.95 \$89.00 \$66.00	•

	Earnings	Taxes	Deds.	Net Pay
Current	\$2,408.31	\$460.20	\$220.16	\$1,727.95
YTD	\$16,274.45			\$11,906.83

Pay Per. End	CDNo	CDAmt
03-29-08	01768117	\$1,727.95

ADVOCATE HEALTH & HOSPITALS CHRIST HOSPITAL 25001 4210 3483599 MCCOO, SHEARITA D. 8841 S ELIZABETH  $\begin{array}{c} \text{Payroll Reporting - Online Pay Stub} \\ \text{Case 08-18960} \\ \text{Doc 1} \\ \text{Filed 07/24/08} \\ \text{Entered 07/24/08 09:49:25} \\ \text{Document} \\ \text{Page 38 of 44} \end{array}$ 

Pay Date:

	Earnings	Taxes	Deds.	Net Pay
Current	\$2,289.47	\$398.61	\$256.30	\$1,634.56
YTD	\$20,183.91	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$14,741.14

Pay Per. End	CDNo	CDAmt
04-26 <b>-</b> 08	01813065	\$1,634.56

ADVOCATE HEALTH & HOSPITALS CHRIST HOSPITAL 25001 4210 3483599

MCCOO, SHEARITA D. 8841 S ELIZABETH CHICAGO IL 60620 Payroll Reporting - Online Pay Stub Doc 1 Filed 07/24/08 Entered 07/24/08 09:49:25 Desc Main Document Page 39 of 44

Pay Date:

CDAmt

\$1,897.32

CDNo

01745669

•					• .	3/2	20/2008
Description REGULAR OVERTIME NGTSHIFT OVERTIME EVESHIFT CLIN ED WKDSHIFT SCHD PTO NSCHDPTO HLDYPREM 07 AWARD	Rate 20.6000 32.5100 3.0000 32.5850 2.5000 20.60000	Hours 76.50 15.30 68.30 5.00 32.00 3.50 22.35	Current \$1.575.90 \$497.40 \$204.90 \$162.93 \$80.00 \$72.10 \$0.00 \$0.00 \$0.00	\$2,189.88 \$1,256.13 \$0.00 \$191.25 \$102.38 \$241.26 \$494.40 \$329.60 \$293.55	Taxes/Deds. FEDERAL ILLINOIS MEDICARE SÓC SEC DTLPPO F HP1000 F OPT ADD OPTLF C OPTLF EE OPTLF S GIFTSHOP	\$282.48 \$66.44 \$35.46 \$151.61 \$17.49 \$175.00 \$3.46 \$0.37 \$2.80 \$5.50	\$339.80 \$184.31 \$788.09 \$104.94 \$1,050.00 \$20.76 \$2.22 \$16.80
PTO BAL	No. of the second secon	74.40			WASHMUT CORUS	\$1,808.32 \$89.00	

Net Pay

\$1,897.32

\$10,178.88

ADVOCATE HEALTH & HOSPITALS CHRIST HOSPITAL 25001 4210 3483599

Earnings

Current

YTD

\$2,637.93

\$13,866.14

Taxes

\$535.99

MCCOO, SHEARITA D. 8841 S ELIZABETH CHICAGO IL 60620

Pay Per. End

03-15-08

Deds.

\$204.62

Payroll Rearting - Online Pay Stub Doc 1 Filed 07/24/08 Entered 07/24/08 09:49:25 Desc Main Document Page 40 of 44

							ay Date: 17/2008
Description SCHD PTO REGULAR NGTSHIFT WKDSHIFT OVERTIME NSCHDPTO HLDYPREM 07 AWARD EVESHIFT CLIN ED NCLIN ED	Rate 21.1665 3.0000 2.0000		Current \$1,015.99 \$508.00 \$72.00 \$24.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$10,671.22 \$1,607.79 \$289.26 \$2,623.87 \$329.60 \$293.55 \$250.00 \$191.25 \$102.38	Taxes/Deds. FEDERAL LLINOIS MEDICARE SOC SEC. DTLPPO F HP1000 F OPT ADD OPTLF C OPTLF EE OPTLF S GIFTSHOP	Current \$85.71 \$36.41 \$20.94 \$89.56 \$17.49 \$158.00 \$3.46 \$0.37 \$2.80 \$5.50	\$27.68
PTO BAL		38.70		•	WASHMUT CORUS LAKESIDE	\$1,000.75 \$133.00 \$66.00	
:			man majan dak dara a da a da a da a da a da a da	•			•

	Earnings	Taxes	Deds.	Net Pay
Current	\$1,619.99	\$232.62	\$187.62	\$1,199.75
YTD	\$17,894.44			\$13,106.58

Pay Per. End	CDNo	CDAmt
04-12-08	01790558	\$1,199.75

ADVOCATE HEALTH & HOSPITALS CHRIST HOSPITAL 25001 4210 3483599 MCCOO, SHEARITA D. 8841 S ELIZABETH CHICAGO IL 60620

	- was the same	700	7434			and the second	
O BAL	en de de la company de la comp	68.25	aminiperrilli (i resembri (i i i i i i i i i i i i i i i i i i		WASHMUT CORUS	\$8:	* 9.00
Description EGULAR CHD PTO GTSHIFT KDSHIFT VESHIFT VERTIME SCHDPTO LDYPREM AWARD LIN ED	Rate 20.6000 20.6000 3.0000 2.0000 2.5000	Hours 55.15 24.00 39.15 23.65 16.00	Current \$1,136.09 \$494.40 \$117.45 \$47.30 \$40.00 \$0.00 \$0.00 \$0.00	\$494.40 \$1,051.23 \$196.56 \$111.25 \$1,529.55 \$329.60 \$293.55 \$250.00	Taxes/Deds FEDERAL ILLINOIS MEDICARE SOC SEC DTLPPO F HP1000 F OPT ADD OPTLF C OPTLF EE OPTLF S GIFTSHOP	\$1 \$2 \$1 \$1 \$1 \$1 \$1 \$3 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1	3/6/2008  rent Y-T-D 15.45 \$792.4 12.36 \$273.3 23.82 \$148.8 11.85 \$636.4 17.49 \$87.4 5.00 \$87.5 23.46 \$17.3 28.0 \$14.0 5.550 \$27.5 \$72.4

ADVOCATE HEALTH & HOSPITALS CHRIST HOSPITAL 25001 4210 3483599

MCCOO, SHEARITA D. 8841 S ELIZABETH CHICAGO IL 60620

# © 1993-2008 EZ-Filing, Inc. [1-800-998-2424] - Forms Software Only

Filed 07/24/08 Entered 07/24/08 09:49:25 Desc Main Case 08-18960 Doc 1 Page 42 of 44

	Northern District o	
IN	NRE:	Case No
М	ccoo, Shearita D	Chapter <b>7</b>
	Debtor(s)	
	DISCLOSURE OF COMPENSATION OF	F ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attornous year before the filing of the petition in bankruptcy, or agreed to be paid to me, for so of or in connection with the bankruptcy case is as follows:	
	For legal services, I have agreed to accept	\$676.00
	Prior to the filing of this statement I have received	\$\$351.00
	Balance Due	\$325.00
2.	The source of the compensation paid to me was: Debtor Debtor Other (specify):	
3.	The source of compensation to be paid to me is: Debtor Other (specify):	
4.	✓ I have not agreed to share the above-disclosed compensation with any other person	unless they are members and associates of my law firm.
	I have agreed to share the above-disclosed compensation with a person or persons together with a list of the names of the people sharing in the compensation, is attach	who are not members or associates of my law firm. A copy of the agreement
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects	of the bankruptcy case, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in det</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, a</li> <li>d. Representation of the debtor in adversary proceedings and other contested bankrupt</li> </ul>	h may be required; nd any adjourned hearings thereof;
	e. [Other provisions as needed]	
6.	By agreement with the debtor(s), the above disclosed fee does not include the following stitigation/Adversary Proceedings Motions to Redeem \$400.00 Credit Education Fees	services:

# CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. July 24, 2008 /s/ Troy L Gleason Date Signature of Attorney Gleason & Gleason Name of Law Firm

Filed 07/24/08 Entered 07/24/08 09949:25 Desc Main Document Page 43 of 44

Certificate Number: 00437-ILN-CC-004013003

# **CERTIFICATE OF COUNSELING**

I CERTIFY that on May 15, 2008		at 6:48 o'clock PM MDT	
Shearita McCoo		received from	
Black Hills Children's Ranch, Inc.			
an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the			
Mosthers Division care		an individual [or group] briefing that complied	
with the provisions of 11 U.S.C. §§ 109(h) and 111.			
A debt repayment plan was not prepared . If a debt repayment plan was prepared, a copy of			
the debt repayment plan is attached to this certificate.			
This counseling session was conducted by internet and telephone			
Date: May 15, 2008	Ву	/s/Kagney Mosteller	
	Name	Kagney Mosteller	
	Title	Credit Counselor	

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Case 08-18960

# Entered 07/24/08 09:49:25 Desc Main Page 44 of 44

(Joint Debtor)

IN RE:	Case No.		
Mccoo, Shearita D	Chapter 7		
Debtor(s)			
DECLARATION REGARDING ELEC Signed by Debtor(s) or Corporate R To Be Used When Filing over the	Representative		
PART I - DECLARATION OF PETITIONER A. To be completed in all cases.	Date: May 17, 2008		
I(We) Shearita D Mccoo and , the undersigned debtor(s), corporate officer, partner of member, hereby declare under penalty of perjury that the information I(we) have given my (our) attorney, including correct social security number(s) and the information provided in the electronically filed petition, statements, schedules, and if applicable, application to pay filing for in installments, is true and correct. I(we) consent to my(our) attorney sending the petition, statements, schedules, and this DECLARATION to the United States Bankruptcy Court. I(we) understand that this DECLARATION must be filed with the Clerk in addition to the petition. I(we) understand that failure to file this DECLARATION will cause this case to be dismissed pursuant to 11 U.S.C. sections 707(a) and 105.			
B. To be checked and applicable only if the petitioner is an individual (o debts and who has (or have) chosen to file under chapter 7.	or individuals) whose debts are primarily consumer		
✓ I(we) am(are) aware that I(we) may proceed under chapter 7, 11, 12, or relief available under each such chapter; I(we) choose to proceed under chapter 7.	of Title 11 United States Code; I(we) understand the chapter 7; and I(we) request relief in accordance with		
C. To be checked and applicable only if the petition is a corporation, parts	nership, or limited liability entity.		
☐ I declare under penalty of perjury that the information provided in this pet to file this petition on behalf of the debtor. The debtor requests relief in a	etition is true and correct and that I have been authorized accordance with the chapter specified in the petition.		